PTO/SB/22 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031 frademark Office; U.S. DEPARTMENT OF COMMERCE II S Datent and Tr

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information universe it displays a valid OMB control number. PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) BOCKET Number (Optional) BRADG_DODIES BRADG_DODIES					
				8540G-000156	
Application Number 10/772,699				Filed February 5, 2004	
For PASSIVE HYDROGEN VENT FOR A FUEL CELL					
Art Unit	1795			Examiner Keith D. W	alker
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
			Fee	Small Entity Fee	
	\boxtimes	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ <u>130</u>
		Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
		Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
		Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
		Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
	Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed.				
	Payment by credit card. Form PTO-2038 is attached.				
	The Director has already been authorized to charge fees in this application to a Deposit Account.				
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>08-0750</u> .				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
☑ attorney or agent of record. Registration Number <u>35,085</u>					
attorney or agent under 37 CFR 1.34(a).					
Registration number if acting under 37 CFR 1.34(a).					
June 30, 2010					
		Signature	Date		
Anna M. Budde				(248) 641-1600	
Typed or printed name Telephone Number					
IOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if nore than one signature is required, see below.					

☐ Total of __ _ forms are submitted.

This collection of Information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete including gathering, representing, and unkniffing the completed application from the USFTO. There will vary depending upon the individual case. Any comments on the amount of time you require to complete this form another suppessions for reducing the burder, should be sent to the Chief Information Officer U.S. Patient and ADDRESS. SEND TO: Commissioner for Patients, P.O. Set 464, Alexandriu, V.J. 22513-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Set 1000 and Select option 2.